

CHAPTER 24 ADULT DAY CARE AND FACILITY-BASED RESPITE CARE

321—24.1(231) Scope and purpose. The purpose of adult day care/adult day health services is to promote a maximum level of independence to functionally impaired adults living in the community. This is accomplished through a coordinated program of preventative, maintenance and rehabilitative services in a facility outside an individual's home and based on the individual's needs.

Adult day care/adult day health is a participant-centered and participant-oriented community-based service. An adult day care center is facility-based, as opposed to in-home based.

321—24.2(231) Definitions. As used in this chapter:

"Adult day care/adult day health" (NAPIS) means provision of personal care for dependent adults in a supervised, protective, congregate setting during some portion of a 24-hour day. Services offered in conjunction with adult day care/adult day health typically include social and recreational activities, training, counseling, meals for adult day care and services such as rehabilitation, medications assistance, and home health aide services for adult day health.

"Adult with functional impairments" means an adult who has a psychological, cognitive or physical impairment creating the inability to perform personal and instrumental activities of daily living and associated tasks necessitating some form of supervision or assistance or both.

"Care conference" means a meeting of the service provider, participant, the family or caregiver of the participant, and the interdisciplinary team for the purpose of discussing, identifying, addressing, implementing, and reviewing plans to meet needs regarding the participant's care.

"Care plan" means the document that organizes the services to meet the needs identified in the assessment.

"Department" means the Iowa department of elder affairs.

"Facility" means the physical plant and equipment of an adult day care/adult day health center whose program has been approved as meeting the standards established in these rules. Examples include, but are not limited to, adult day care facilities, respite care facilities, nursing facilities, and hospitals.

"Governing body" means an individual or group of individuals having administrative or contractual responsibility for the programs and services.

"Interdisciplinary team" means a team which may be composed of permanent staff, consultants, or a combination of both.

"Participant" means an eligible adult with specialized or challenging mental, physical, behavioral, or cognitive needs who benefits from participating in the adult day care/adult day health program.

"Plan of care" means the process by which the participant's needs are assessed and addressed from intake through discharge.

"Provider" means any adult day care/adult day health facility which meets the standards established in these rules.

"Representative" means the primary contact(s) in relation to care planning, support system, or decision making.

"Staff" means the administrator, director, or any person considered part of the staff ratio.

"Volunteer" means an individual who is not a paid staff member who performs specific duties and works directly under the supervision of a designated staff member.

321—24.3(231) Target population. The target population for adult day care/adult day health service will be functionally impaired adults who require supervision and assistance or both.

Each center shall define the target populations it is able to serve, considering the needs of the participants and the scope and intensity of services the center can provide.

321—24.4(231) Plan of care. Each individual shall have an assessment conducted and a written care plan developed based upon the needs of the participant and the services available. This process shall include:

1. Intake screening.
2. Preadmission assessment.
3. Medical information.
4. Assessment.
5. Written individual care plan.
6. Service documentation.
7. Updated assessment and care plan.

321—24.5(231) Record keeping. Participant and administrative records shall be maintained.

1. Participant records.
2. Administrative records.
3. Written policies and procedures.
4. Quality assurance component.

321—24.6(231) Staffing.

24.6(1) Basic requirements of staff. Each staff member shall be competent and qualified for the position held.

24.6(2) Staff. Staff shall be adequate in number and skills to provide essential core services. Each center that is colocated with another program in the same facility shall have staff with hours that are committed to the adult day care/adult day health program.

24.6(3) Staff training and evaluation. All staff, paid and volunteer, shall receive:

- a. A general orientation.
- b. Training.
- c. A written probationary evaluation within six months and a written performance evaluation periodically thereafter.
- d. Opportunities to participate in in-service training.

24.6(4) Staff-to-participant ratio. The staff-to-participant ratio shall be a minimum of one to six (1:6). Volunteers shall be included in the staff ratio only when they conform to the same standards and requirements as paid staff, meet the job qualification standards of the organization, and have designated responsibilities.

321—24.7(231) Services offered. All adult day care/adult day health centers shall arrange for services by direct provision, purchase or consultation.

24.7(1) Essential core services. These services shall be provided.

- a. Personal care shall include assistance with activities of daily living such as walking, eating, grooming, toileting, and bathing.
- b. Nursing services shall include assessing, monitoring, intervention and evaluating the participant's overall health status.
- c. Social services shall be provided to participants and their representatives to help them with personal, family and psychosocial concerns that relate to the effectiveness of the treatment plan.
- d. Therapeutic activities shall provide purposeful activities to meet the participant's assessed needs and interests adapted to the participant's optimal level of function.
- e. Nutrition services and special diets shall be provided which meet a five-day averaged intake of one-third of the daily recommended dietary allowances (RDAs). If multiple meals are served each day, the combined meals must meet two-thirds RDA for two meals and 100 percent RDA for three meals. Fluids and snacks shall be offered as appropriate to meet the participant's liquid and nutritional needs.

f. Emergency services shall provide instructions for dealing with emergency situations and shall include a written agreement with the participant or representative regarding arrangements for emergency care and ambulance transportation.

g. Therapeutic services shall include:

- (1) Medical services.
- (2) Physical therapy.
- (3) Speech therapy.
- (4) Occupational therapy.

24.7(2) Standards. All services offered in an adult day care/adult day health center shall meet applicable federal, state, department, local and professional requirements.

321—24.8(231) Physical plant. The adult day care/adult day health center shall comply with all applicable federal, state and local building regulations and zoning, fire, and health codes or ordinances.

24.8(1) Each adult day care/adult day health center, when it is colocated in a facility housing other services, shall have its own separate identifiable space for main activity areas during operational hours.

24.8(2) The facility shall have sufficient space to accommodate the full range of program activities and services.

a. Program space includes the activity areas commonly used by the participants.

(1) Dining and kitchen areas are to be included only if used by participants for activities other than meals.

(2) Reception areas, storage areas, offices, restrooms, passageways, treatment rooms, service areas, or specialized areas used for therapies are not to be included when calculating square footage.

b. There shall be a minimum of 60 square feet of program space per participant.

c. Facilities serving participants with cognitive impairment or who use adaptive equipment should provide at least 80 square feet.

d. There shall be a minimum of one restroom per ten participants. Facilities serving participants with cognitive impairment or who use adaptive equipment should provide at least one restroom for each eight participants.

321—24.9(231) Reporting. Fiscal and performance reports shall be submitted to the department by the appropriate area agency on aging in compliance with the general and specific conditions of the contract with the Iowa department of elder affairs.

321—24.10(231) Waiver. An adult day care/adult day health facility may submit a written request for a waiver, which includes a statement of reasons for noncompliance of a rule and assurances that the needs of the participants will be met and their safety not compromised by the waiver.

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